

Please Send Documents to:

Department of Industrial Relations
Division of Occupational Safety and Health
1450 Enea Circle, Suite 550
Concord, CA 94520
Phone: (925) 602-2665
Fax: (925) 602-2668

**DOCUMENT REQUEST**

TO: Thomas DiPalma, Safety Team Lead, Chevron Richmond Refinery
FROM: Wendy Hogle, Cal/OSHA
DATE: October 28, 2009
SUBJECT: Cal/OSHA Inspection #. 311074728

PLEASE POSTMARK RESPONSE BY: NOVEMBER 9, 2009

Pursuant to the Cal/OSHA investigation conducted on October 21, 2009, it is requested that your facility provide copies of the following documents for review. Please provide the Cal/OSHA inspector with the required copies by the "postmark" date as noted above.

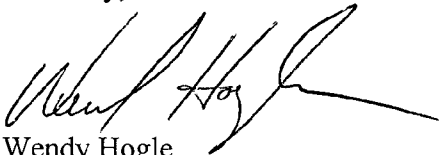
1. Injury Illness Prevention Program (written safety program) (8CCR 3203); *Prior to Oct 6, 2009.* Rec'd _____
2. Injury Illness Prevention Program inspections of the SDA Unit for the six months; *Prior to Oct 6, 2009.* Rec'd _____
3. Logs 300/300A for the years 2007 to 2009 (8CCR 14301); Rec'd _____
4. OSHA 5020 (Employer's First Report of Injury) for the accident dated October 6, 2009; Rec'd _____
5. DWC Form 1 (Worker's Compensation Claim); Rec'd _____
6. Worker's Compensation Insurance Carrier (Proof or certificate); *Prior to Oct 6, 2009.* Rec'd _____
7. Maintenance Records associated with SDA Pumps 104 and 114 for the six months; *Prior to Oct 6, 2009.* Rec'd _____
8. Steam temperature and pressure for the steam tracing line adjacent to SDA Pumps 104 and 114 that constituted the injury dated October 6, 2009; Rec'd _____
9. Data from Chevron's Incident Tracking database related to the accident occurring on October 6, 2009, at SDA Pump 104; Rec'd _____
10. Date of steam tracing line installation for SDA Pump 104; Rec'd _____
11. Site Diagram of the SDA Pump Units; *(Plot Plan)* Rec'd _____
12. Any Standard Operating Procedures (SOP's) relative to SDA Pumps 104 and 114; *Prior to Oct 6, 2009.* Rec'd _____
13. Training topics and records for employees working in the SDA Unit for the six months; *Prior to Oct 6, 2009.* Rec'd _____

14. Any and all medical information related to the injury at SDA Pump 104 on October 6, 2009. Information must include, but not be limited to photographs, and items 4, 5, and 6, as listed above.

Rec'd _____

Thank you for your time in providing the documents required as itemized above. If you require an extension of time in order to satisfy this request, please contact me at (925) 602-2665 prior to the above requested postmark date.

Sincerely,



Wendy Hogle
Associate Safety Engineer
Division of Occupational Safety and Health
Northern California Process Safety Management

Received 10/28/2009

